

02/13/01
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02-15-01

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCEPlease type a plus sign (+) inside this box →

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 30-5022(4015)

First Inventor or Application Identifier Vladimir M. Segal

Title Methods of Forming Aluminum-Comprising Physical Vapor..

Express Mail Label No. PI, 1658555415

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Specification [Total Pages 34] (INCLUDES TITLE PG)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure

3. Drawing(s) (35 U.S.C. 113) [Total Sheets 9]

4. Oath or Declaration [Total Pages 3]

- a. Newly executed (original or copy)
 b. Copy from a prior application (37 C.F.R. § 1.63(d))
 (for continuation/divisional with Box 16 completed)
 i. DELETION OF INVENTOR(S)
 Signed statement attached deleting
 inventor(s) named in the prior application,
 see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

Assistant Commissioner for Patents
ADDRESS TO: Box Patent Application
Washington, DC 20231

5. Microfiche Computer Program (Appendix)
 6. Nucleotide and/or Amino Acid Sequence Submission
 (if applicable, all necessary)
 a. Computer Readable Copy
 b. Paper Copy (identical to computer copy)
 c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
 8. 37 C.F.R. § 3.73(b) Statement Power of
 (when there is an assignee) Attorney
 9. English Translation Document (if applicable)
 10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
 Statement (IDS)/PTO-1449 Citations
 11. Preliminary Amendment
 12. Return Receipt Postcard (MPEP 503)
 (Should be specifically itemized)
 * Small Entity Statement(s) Statement filed in prior application
 (PTO/SB/09-12) Status still proper and desired
 13. Certified Copy of Priority Document(s)
 (if foreign priority is claimed)
 14. Other: Check _____
 15. Other: Check _____

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP) of prior application No. /

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			or <input checked="" type="checkbox"/> Correspondence address below	
Name	Shannon Morris Honeywell International Inc.				
Address	Box 2245, 101 Columbia Road				
City	Morristown	State	NJ	Zip Code	07962
Country		Telephone	(724) 452-1300	Fax	(724) 452-7701

Name (Print/Type) David G. Latwesen, Ph.D. Registration No. (Attorney/Agent) 38,533

Signature 

Date 2/13/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

H057-142 (DGL)

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 1,028.00)**Complete if Known**

Application Number	FILED HEREWITH
Filing Date	
First Named Inventor	Vladimir M. Segal et al.
Examiner Name	
Group / Art Unit	
Attorney Docket No.	30-5022(4015)

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-0925

Deposit Account Name Wells, St. John et al.

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
101	790	201	395 Utility filing fee	710.00
106	330	206	165 Design filing fee	
107	540	207	270 Plant filing fee	
108	790	208	395 Reissue filing fee	
114	150	214	75 Provisional filing fee	
SUBTOTAL (1)			(\$ 710.00)	

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
31	-20** = 11	x 18	= 198
Independent Claims 4	- 3** = 1	x 80	= 80
Multiple Dependent			= 0

**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	22	203 11 Claims in excess of 20
102	82	202 41 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	82	209 41 ** Reissue independent claims over original patent
110	22	210 11 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		
(\$ 278.00)		

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	0.00
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	0.00
139	130	139 130 Non-English specification	0.00
147	2,520	147 2,520 For filing a request for reexamination	0.00
112	920*	112 920* Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	0.00
115	110	215 55 Extension for reply within first month	0.00
116	400	216 200 Extension for reply within second month	0.00
117	950	217 475 Extension for reply within third month	0.00
118	1,510	218 755 Extension for reply within fourth month	0.00
128	2,060	228 1,030 Extension for reply within fifth month	0.00
119	310	219 155 Notice of Appeal	0.00
120	310	220 155 Filing a brief in support of an appeal	0.00
121	270	221 135 Request for oral hearing	0.00
138	1,510	138 1,510 Petition to institute a public use proceeding	0.00
140	110	240 55 Petition to revive - unavoidable	0.00
141	1,320	241 660 Petition to revive - unintentional	0.00
142	1,320	242 660 Utility issue fee (or reissue)	0.00
143	450	243 225 Design issue fee	0.00
144	670	244 335 Plant issue fee	0.00
122	130	122 130 Petitions to the Commissioner	0.00
123	50	123 50 Petitions related to provisional applications	0.00
126	240	126 240 Submission of Information Disclosure Stmt	0.00
581	40	581 40 Recording each patent assignment per property (times number of properties)	40.00
146	790	246 395 Filing a submission after final rejection (37 CFR 1.129(a))	0.00
149	790	249 395 For each additional invention to be examined (37 CFR 1.129(b))	0.00
Other fee (specify) _____			0.00
Other fee (specify) _____			0.00
* Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Typed or Printed Name David G. Latwesen, Ph.D.

Signature 

Complete (if applicable)

Reg. Number 38,533

Date 2/13/01 Deposit Account User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.